Easing worries

Routine newborn hearing tests sought

By Jim Sanders -- Bee Capitol Bureau Published 12:01 am PDT Monday, July 10, 2006

Christina Venable had undergone a torturous labor and Caesarean birth followed by a seemingly endless marathon of well-wishing and baby-watching, so the 28-year-old Sacramentan was both exhausted and filled with unbridled joy.

Perhaps the furthest thing from her mind, as she counted her blessings Thursday at UC Davis Medical Center, was to request a high-tech hearing examination for her 9-pound newborn, Richard Tyler Venable.

No matter.

At the Sacramento medical center, unlike dozens of other hospitals throughout California, the ears of every newborn routinely are tested before mother and child pack up for home.

Assemblyman Dave Jones, D-Sacramento, has proposed legislation to expand the simple, painless, relatively inexpensive practice statewide.

Venable likes the idea.

"I don't see why anybody wouldn't want to," she said. "I think it's just an extra step that puts a little ease to my mind, to hear that he can hear good."

A first-time mother, Venable smiled at her precious newborn, dressed in white.

"Any test they want to give him, I'm pretty OK with, as long as he's not screaming and crying," she said.

California is the only state that does not universally offer newborn hearing tests, according to a Senate Health Committee analysis of Jones' proposal.

Assembly Bill 2651 passed the Assembly recently without a dissenting vote, and no group is formally fighting the measure.

But some Senate Republicans oppose the bill on fiscal principle, noting that it would raise costs to the state and to numerous hospitals without promising any new funding.

Child health advocates say early detection of hearing loss, coupled with intervention, can save hundreds of thousands of dollars for special education and audiological services during the life of a hearing-impaired person.

"The evidence suggests that there may be a critical window for picking up language -- and the first six months may be particularly important," said Dr. Shirley Russ, a Los Angeles physician representing the American Academy of Pediatrics.

California ranks 49th among the 50 states -- only Ohio is lower -- in the percentage of newborns screened for hearing, according to the National Center for Hearing Assessment and Management, a nonprofit group located at Utah State University.

California law requires only about 180 birthing facilities to screen their newborns for hearing loss -- those at hospitals approved under a state program, California Children's Services, whose primary mission is to serve children with severe or chronic health problems.

Jones' bill would extend the requirement to 135 other hospitals, representing every general acute care facility with a licensed perinatal service. Twenty-nine of the hospitals provide the screenings voluntarily, said Keith L. Nash, a spokesman for the March of Dimes, which is sponsoring AB 2651.

Put simply, current law is expected to result in more than 106,000 newborns not being screened this year, of which statistics suggest that roughly 320 -- three per 1,000 births -- will suffer from hearing loss, according to the March of Dimes.

Jones said his bill would test virtually every infant within days of birth, though not necessarily those born in clinics or hospitals with fewer than 100 births per year. Families in such facilities would receive information on where to obtain outpatient exams.

"I think it's right for the kids, and it's right for the state," Jones said of AB 2651. "It's a very common-sense measure."

To screen newborns, small earphones are placed over their ears. Sounds, consisting of tones or clicks, are sent through the earphones and a child's responses are measured automatically. The exam generally costs about \$30 and takes only a few minutes.

Besides UCD, most major Sacramento-area facilities already offer such exams, including Kaiser Foundation hospitals, Mercy General Hospital, Mercy San Juan Hospital, Mercy Methodist Hospital, and Sutter medical centers in Sacramento, Auburn, Roseville and Davis, officials said.

If signed into law, AB 2651 would take effect in January 2008. Parents would retain the right to refuse testing.

Jones' legislation is supported by the California Medical Association, the California Speech-Language-Hearing Association, California Educators of the Deaf and Hard of Hearing, the Center for Education of the Infant Deaf, and the California Association for Nurse Practitioners, among others.

AB 2651 would increase state and federal costs by about \$3.2 million per year for intervention services and for testing of Medi-Cal patients, according to an analysis by the Assembly Appropriations Committee.

But taxpayers ultimately could receive a "potentially significant," though indeterminate, savings in education and social programs from early intervention, the committee analysis said.

"I think we'll end up saving a lot in the long term," Jones said. "On balance, it makes a lot of sense."

Under AB 2651, nearly 90 hospitals statewide would need new equipment to conduct the hearing tests. Such machines cost about \$17,000 to \$25,000 apiece, officials said.

The California Hospital Association has taken no position on the bill.

State Sen. Dave Cox, R-Fair Oaks, voted against AB 2651 in the Senate Health Committee, which passed the measure 5-3.

"There are all sorts of health coverages and services that people would sit down and agree, 'These are great, we should do these,' " said Kevin Bassett, Cox's chief of staff. "The question is, how do you fund them?"